

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Montague et al.
Title: MULTI-FUNCTION TOOL
WITH CARTRIDGE
Prior Appl. No.: 09/756,547
Prior Appl. Filing Date: 01/08/2001
Examiner: Not Yet Assigned
Art Unit: Not Yet Assigned

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EV 055901769 US (Express Mail Label Number)	7/29/03 (Date of Deposit)
Chris Escavilla (Printed Name)	
Chris Escavilla (Signature)	

PATENT APPLICATION
TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[] Continuation [☒] Division [] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

[] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [☒] Specification, Claim(s), and Abstract (25 pages).
- [☒] Formal drawings (9 sheets, Figures 1-18).
- [☒] Copy of Declaration and Power of Attorney (6 pages).
- [☒] Copy of Assignment of the invention to Alterra Holdings Corporation.
- [☒] Assignment Recordation Cover Sheet.

☒ Check in the amount of \$40.00 for Assignment recordation.

☒ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$750.00		\$750.00
Total Claims:	20	-	20	=	0	x	\$18.00	=	\$0.00
Independents:	4	-	3	=	1	x	\$84.00	=	\$84.00
If any Multiple Dependent Claim(s) present:						+	\$280.00	=	\$0.00
							SUBTOTAL:	=	\$834.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):								=	\$0.00
							TOTAL FILING FEE:	=	\$834.00

☒ A check in the amount of \$834.00 to cover the filing fee is enclosed.

☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

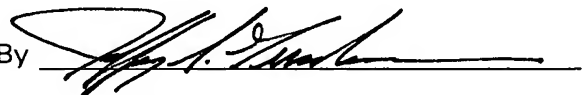
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

7/29/03

By



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